LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS OFFICE OF AGING AND ADULT SERVICES



Level of Care Eligibility Tool

LOCET User Manual for System Users Version 2.0

> OAAS Policy Section 01-12-2010

This manual provides instruction on how to conduct a LOCET interview in connection with Level of Care Screening for OAAS Long Term Care services. Instructions for systems input of LOCET information is also provided in this manual.

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Department of Health & Hospitals, Office of Aging & Adult Services

PART 1 LOCET User Manual for System Users (OAAS and Contracted Users) PART 1

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Glossary

1.0 Definition of Terms:

<u>ADHC Adult Day Health Care waiver program</u> A Medicaid waiver service which provides direct care for the physically and/or mentally impaired. It provides a pre-determined number of hours per day of oversight for the individual in a licensed day care center. These services allow them to live in the community instead of a Nursing Home or Institution.

<u>Admission Date in LOCET Event Log</u> For home and community based services, this field will be left blank. For nursing facilities, the date the person is actually admitted to the facility will be entered here.

Adult Residential Center (Assisted Living)/ Board and care A facility or residence which provides adult residential care for compensation to two or more adults who are unrelated to the licensee or operator. Adult residential care includes but is not limited to the following services: lodging, meals, medication administration, intermittent nursing services, assistance with personal hygiene, assistance with transfers and ambulation, assistance with dressing, housekeeping, and laundry.

<u>Applicant</u> A person who applies for a program administered by the Department of Health and Hospitals.

ARCP An Adult Residential Care Program (see above definition for Adult Residential Center (Assisted Living)/board and care)

<u>Audit Review Determination</u> LOCET completed as part of regular, on-going audit review functions. An Audit Review Determination is completed by a DHH-designated reviewer for audit purposes. The Audit Review Determination supersedes the original LOCET determination.



<u>CAP (Client Assessment Protocol)</u> Indicators derived from information gathered on the LOCET. A CAP is said to "trigger" when it identifies items that alert the assessor to the client's potential problems or needs. See Glossary Item, "Imminent Risk."

<u>Caregiver</u> A person who gives care for an individual. An informal caregiver does not receive payment for the care received. A paid (formal) caregiver receives monetary compensation for the services rendered. If a caregiver spends any of his/her time giving care as an unpaid, informal caregiver, this person should be considered an "informal" caregiver. Item B.10 on the LOCET should refer to him/her. See Section 4.11.7.1.



An Active Caregiver is one who is at least 18 years of age, usually sees the applicant at least three days per week, and one who helps the applicant with any activity of daily living.

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READER's KEY: Lines of text marked with a marginal designator in the left margin do not appear in the LOCET User Manual for Nursing Facility Personnel. See pp. i and ii.

<u>Closed Status</u> Closed Status is automatically assigned to a LOCET under certain conditions. A LOCET which was previously in Pending Medical Statement Status will be assigned Closed Status if medical documentation is not submitted within 30 days from the assignment of Pending Medical Statement Status. A LOCET may be reopened by Override if medical documentation is submitted after the 30-day request period has expired. A LOCET which was previously in Incomplete Status because of an interrupted call will convert to Closed Status after 34 days of being in Incomplete Status.

<u>Curator</u> An individual who has been legally appointed to represent a person of the age of majority, or an emancipated minor, who due to an infirmity, is unable consistently to make reasoned decision regarding the care of his person and property, or to communicate those decision, and whose interest cannot be protected by less restrictive means. ¹

<u>Delusions</u> "Fixed, false beliefs not shared by others that the applicant holds even when there is obvious proof or evidence to the contrary (e.g., belief that he or she is terminally ill; belief that spouse is having an affair; belief that food is poisoned)."²

<u>Denied Status</u> LOCET status which indicates that Level of Care Eligibility was not met. An applicant whose LOCET is in denied status has the right to request an appeal with the DHH Bureau of Appeals.

EDA (Elderly and Disabled Adult waiver program) A Medicaid Home and Community-based service waiver providing alternative services to individuals. These services allow them to live in the community instead of a Nursing Home or Institution.

Effective Date of Service The Vendor Payment date will be entered here.

Extensive Assistance Assistance involving weight-bearing which was provided 3 or more times in a look-back period.

<u>Guided Maneuvering</u> Assistance by physical guidance of limbs. This is non-weight-bearing assistance.

<u>Hallucinations</u> "False perceptions that occur in the absence of any real stimuli. An hallucination may be auditory (e.g., hearing voices). Visual (e.g., seeing people, animals), tactile (e.g., feeling

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¹ Louisiana Civil Code Articles 389-392

² Morris JN, Fries BE, Bernabei R, et al. RAI-Home Care (RAI-HC)© Assessment Manual for Version 2.0. *InterRAI Corporation*. 2002:2.0; p.97.

bugs crawling over skin), olfactory (e.g., smelling poisonous fumes), or gustatory (e.g., having strange tastes)."³

<u>Hemodialysis</u> "A method for removing unwanted byproducts from the blood of clients with renal insufficiency or renal failure through the use of a machine (dialyzer)."⁴

<u>Hospital</u> A facility that operates 24 hours a day, seven days a week to provide diagnosis, treatment and care of persons who are suffering from illness, injury, infirmity or deformity or other physical or mental condition for which medical, surgical and/or obstetrical services would be available and appropriate, and who may be admitted for emergency or overnight stay or longer.

<u>ICF/DD</u> (Intermediate Care Facility for the Developmentally Disabled) ICF/DD specifically refers to a facility that operates 24 hours a day and provides lodging, meals, maintenance, personal care and health or rehabilitative services to persons with developmental disabilities.

Imminent Risk A determination that the applicant is at risk of institutionalization within 120 days if no care is given. Imminent Risk will be shown as a CAP on the LOCET CAPs display and on the LOCET Grid screen of the System software. Additional medical information may be requested for determination of Imminent Risk if the LOCET data indicates Imminent Risk is not met. The Imminent Risk determination is not applicable to Nursing Facility admissions. For the programs where Imminent Risk is a factor of eligibility, at least one Pathway on the LOCET must be met and the applicant must be determined to be at Imminent Risk of Nursing Facility placement within 120 days.

<u>Informant</u> The informant is the person who supplies information to the intake analyst for the LOCET. The informant and the personal representative may or may not be the same person. It is important to determine the relationship of the informant with the applicant.

<u>Intake Analyst</u> Specially trained personnel who administer LOCET to applicants or their informant(s).

<u>Limited Assistance</u> Assistance of non-weight bearing nature 3 or more times in look-back period.

LOCET The Louisiana Level of Care Eligibility Tool; a scientifically developed and research-based evaluation tool which will be utilized in the determination of Level of Care for entry to long-term programs.

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³ Morris JN, Fries BE, Bernabei R, et al. p.98.

⁴ Ibid. p.118.

LOCET Individual Summary Page (LISP) A summary page which can be printed for each LOCET taken. It will list the pathway of eligibility (if any), the presence of Imminent Risk, the status of the LOCET.

<u>LOCET Status</u> An assignment of a disposition of the LOCET. In most cases the system will assign the status automatically. A manual override of status by a LOCET administrator will occur in very few instances.

<u>LOCET Status:</u> <u>Approved by Override</u> A status which is assigned by Administrator input. This status will be used to denote an approved OAAS Review of a previously denied LOCET. It will also be used to identify an approval by Bureau of Appeals on an Appeal case.

LOCET Status: Approved LOCET status which indicates that Level of Care Eligibility was met on at least one Pathway.

<u>LOCET Status: Incomplete</u> A status assigned to a LOCET which is incomplete for any reason. I.e., for contracted call center calls, the caller is unable to complete the call for any reason. When the intake analyst has completed "Signature" and "date" in item J.19C and all Pathways are not completed on LOCET, then the system will assign incomplete status.

LOCET Status: Pending Medical Statement A temporary status assigned to certain LOCETs. For eligibility determined only in Pathways 3, 4, or 5, Pending Medical Statement status will be assigned because of the need for the Statement of Medical Status to document the active or unstable conditions noted in those Pathways. After a Pathway 3, 4 or 5 Determination has been rendered, Pending Medical Statement Status will be changed to "Approved" or "Denied." Pending Medical Statement Status will revert to "Closed" status if complete medical documentation is not received by the reviewer within 30 days. A Closed LOCET may be reopened upon receipt of Medical Documentation after the 30 day request period.

<u>LOCET Status: Unknown</u> A status assigned to a LOCET which has not been "signed" by the Intake Analyst in the appropriate area. Unknown Status is commonly the result of a system user starting a LOCET and abandoning it when it was discovered that the LOCET was not the appropriate document to open.

<u>LOCET TYPE: Audit Determination</u> LOCET completed as part of Quality Initiative by OAAS. This LOCET type is never used for any other situation. This always should reflect a LOCET done as part of the regular Audit Process conducted by OAAS.

<u>LOCET TYPE: Initial Determination</u> LOCET completed to determine eligibility for long term care programs. Not necessarily the first LOCET completed on an applicant. After a denial, a subsequent LOCET will also be considered an Initial Determination.

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<u>LOCET TYPE: Follow-up after Incomplete</u> "Follow-up after Incomplete" will be used to designate a LOCET which is initiated within 48 hours after a LOCET was abandoned as

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"Incomplete" due to an uninformed caller. That is, if a LOCET is initiated on Monday and Item B.6. is answered as "3" or "4," the caller will be informed that the intake analyst will need to speak to someone who has had more recent contact with the applicant. If, on Tuesday, a LOCET is initiated on the same applicant, the intake analyst will see the recent "Incomplete" LOCET and will designate the "Tuesday LOCET" as a "Follow-up after Incomplete." This will serve as a Quality Assurance flag to OAAS staff of the situation which transpired.

<u>Long Term Personal Care Service (LT PCS)</u> A Medicaid State Plan program which offers assistance to Medicaid recipients and allows them to remain in their homes rather than going to a nursing home.

All LT-PCS applicants must meet Level of Care and Imminent Risk requirements as defined by OAAS.

<u>Long Term Care Programs</u> Any/all programs available for individuals 55 to 65 or older and those individual adults with disabilities (i.e. EDA, ADHC, NF, etc.).

<u>Look-Back Period</u> A period of time in which a LOCET item is evaluated. The length of the look-back period being evaluated will be noted for each item in the LOCET. <u>The first day of the look back period is the day the LOCET is being administered, "looking back" 24 hours a day for the prescribed number of days noted for each particular LOCET item.</u>

MDS-HC (Minimum Data Set for Home Care) An assessment tool developed by the inter-RAI network and used by OAAS to facilitate the determination of Level of Care for Home and Community Based Services (HCBS). This assessment occurs only after the applicant has passed a Pathway of eligibility in the LOCET screening process.

MDS-HC Assessor Specially trained personnel who administer the MDS-HC. The MDS-HC Assessor must be registered with OAAS. This field (Item B.4. on the Client Face Sheet) is for use by MDS-HC Assessor only; it will not be used by the LOCET intake analyst.

Nursing Facility A facility that operates 24 hours a day serving two or more persons who are not related by blood or marriage to the operator and which provides maintenance, personal care, or nursing for persons who, by reason of illness or physical infirmity or age, are unable to properly care for themselves.

<u>Office of Aging and Adult Services (OAAS)</u> Program office within the Department of Health and Hospitals. OAAS is responsible for the administration of Medicaid long term service programs for adults with disabilities or who are elderly.

<u>PACE Program of All-Inclusive Care for the Elderly</u> A program which offers pre-paid, capitated, comprehensive health care services in a specific geographic area. The services are designed to assist elders 55 and older to live in their homes in the community as long as it is medically and socially feasible. PACE programs coordinate and provide all needed preventive, primary, acute

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<u>Parenteral feedings</u> Introduction of a nutritional substance into the body by intravenous (I.V.) means.

<u>Pathway</u> An avenue of eligibility which will identify applicants who meet one set of criteria for Louisiana's Long Term Supports programs.

<u>Pathway 3, 4 or 5 Determination</u> A process in which an OAAS-designated Reviewer will review LOCET documentation. This will occur when the applicant is determined to meet Level of Care criteria only in Pathway(s) 3 or 4 or 5. The OAAS-designated Reviewer will review the Statement of Medical Status to determine if the acute or active medical condition(s) noted in Pathway(s) 3 or 4 or 5 is substantiated on the Statement of Medical Status.

<u>Peritoneal Dialysis</u> Removal of toxic substances from the body by perfusing a sterile substance through the peritoneal cavity (i.e. renal failure).

<u>Personal Representative</u> A person who represents the interests of the applicant who is not capable of self-direction. The function of the personal representative is to accompany, assist, and represent the applicant in the program evaluation process, and to aid in obtaining all necessary documentation for the agency's evaluation for services. The personal representative has the power to make decisions for the applicant concerning all aspects of various programs administered by the Department of Health and Hospitals (DHH). The Personal Representative may not be a paid provider of services for the applicant. If an applicant wishes to appoint a personal representative, the form OAAS-RF-06-003 must be completed and submitted with all other required documents.

<u>Point of Entry Contractor</u> An entity designated by OAAS to serve as the access point for Long Term Care Services administered by OAAS.

<u>Power of Attorney</u> A written document in which one person (the principal) appoints another person to act as an agent on his or her behalf, thus conferring authority on the agent to perform certain acts or functions on behalf of the principal.⁵

<u>Primary Physician</u> A physician who performs continuing care for an individual. A primary physician may oversee or be aware of all treatments for an individual which are done by other physicians.

<u>Program Choice Form</u> Letter sent to applicant which serves two purposes: It states the LOCET approval determination and it requests the applicant to state his or her choice of program(s).

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⁵ http://legal-dictionary.thefreedictionary.com/Power+of+Attorney

<u>Program Denial Notice</u> Letter sent to applicant who is denied on LOCET giving the applicant appeal rights.

<u>Program Requirements</u> Requirements which must be met for eligibility in any of the programs administered by the Department of Health and Hospitals. Program requirements vary from program to program.

<u>Shelter</u> Temporary housing established for evacuees or for persons who are homeless.

Statement of Medical Status (SMS) A form (OAAS PF-06-009) designed to gather current medical information to use in eligibility determination, service planning and care for home and community-based or nursing facility services. The SMS elicits information about the client's address and other demographic data, medical information regarding diagnoses, medications, special care procedures, and hospitalizations within the previous 2 years. Additional information regarding the client's most recent physical exam findings is recorded on the SMS, including vital signs, range of system findings and the last two office visit dates. The physician's name and address are shown on the form, and it must be signed by the physician, the physician's assistant, a nurse practitioner, registered nurse or a licensed practical nurse.

<u>Status</u> An assignment of a disposition of the LOCET. In most cases the system will assign the status automatically. A manual override of status by a LOCET administrator will occur in very few instances.

<u>Tutor</u> A person who has been lawfully appointed to the care of the person and property of a minor ⁶

<u>Weight bearing support</u> For example, "Holding weight of one or both lower limbs, trunk." May also include holding the weight of the arm(s).

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⁶ Louisiana Civil Code Articles 246-248

⁷ Morris JN, Fries BE, Bernabei R, et al. p.79.